## The Committee seeks the following information related to the COVID-19 pandemic:

- 1. Are institutions of higher education ensuring the health and safety of students, faculty and staff during the 2020 Fall Semester? When applicable, please speak directly to classroom and lab settings, dormitories and dining halls. Starting at the end of April, UTHSA gradually reintroduced students to their clinical curriculum such that our medical, dental, nursing, and allied health students are successfully integrated into a phased return of their clinical education and training. The didactic education component of the students' programs did not stop as we transition to an online delivery platform. Enrollments for 2020 Fall remain largely on target, although there may be fewer nursing students seeking advanced degrees and training (master's or doctoral degrees) because nurses are in such high demand in the employment marketplace. Social distancing, daily temperature checks, and face masks are strictly adhered to as well in the classroom and lab settings. UTHSA doesn't have student dormitories. Cafeteria and dining room settings also employ the same CDC recommended protocols for these types of venues. Significant investment in our information technology infrastructure was urgently needed to migrate to an online educational platform as well as to support a large portion of our workforce that began telecommuting as a result of the pandemic. Current year funds were redirected to make critical purchases for an online environment, but the new equipment, software, and licensing requires annual maintenance and renewal for which no future funding has been secured, but will be desperately needed.
- 2. What plans are in place for on-campus COVID-19 testing? Do institutions have the capacity to provide testing on campus, both in terms of available supplies and labs to process tests? The Department of Pathology made and manufactured testing kits when there were none available nationally. The research community scaled-down research activities in order to strategize the use of PPE to reduce demand and in response to social distancing. Where excess inventory was available, PPE was diverted to clinics. While the supply chain is loosening for basic PPE items, KN-95s, swabs and reagents continue to be challenging to acquire and any continued shortages will make it difficult to provide testing across our community for the COVID-19 virus. UTHSA employees are collecting COVID-19 tests at our Wellness 360 Employee and Student Clinic and our other primary care clinics. The UTHSA Department of Pathology Lab is

processing these community COVID-19 tests, in collaboration with University Hospital, our primary teaching hospital. Efforts are expanding to accommodate the testing of students, athletes, faculty, staff at our sister institution, UTSA, and some San Antonio Area Independent School Districts, as well as to other surrounding healthcare facilities with overflow needs. We anticipate these testing efforts to continue until an effective vaccination is discovered and widely introduced into the population.

- 3. If applicable, what are plans for collegiate athletics this Fall? How will student athletes be kept safe? If fans will be permitted to attend events, how will fans be kept safe? Not applicable
- 4. What do projected enrollment figures and formula funding look like to institutions for this school year? Enrollments for 2020 Fall remain largely on target, although there may be fewer nursing students seeking advanced degrees and training (master's or doctoral degrees) because nurses are in such high demand in the employment marketplace. Significant investment in our information technology infrastructure was urgently needed to migrate to an online educational platform as well as to support a large portion of our workforce that began telecommuting as a result of the pandemic. Current year funds were redirected to make critical purchases for an online environment, but the new equipment, software, and licensing requires annual maintenance and renewal for which no future funding has been secured, but will be desperately needed.
- 5. Has there been a noticeable impact on staff or faculty retention with regard to concerns about the pandemic? Impact on staff and faculty retention has been negligible because, in collaboration with University Hospital, our primary teaching hospital, we initiated hazard pay for many frontline healthcare positions.
- 6. Health Related Institutions were exempt from the 5% budget cuts earlier this year, due to their important role in resolving the public health crisis. What are some of the programs, research, and responses to the pandemic that our Health Related Institutions have contributed? Infectious disease physicians at UTHSA were among the first in the nation to test an investigational drug developed to treat the novel coronavirus. We are among one of the few sites around the world participating in a clinical trial sponsored by the

National Institutes of Health's Institute of Allergy and Infectious Diseases to test Remdesivir, an investigational drug to treat hospitalized COVID-19 patients who are critically ill. Additionally, we have 50 plus ongoing basic and clinical studies including: (a) development of animal models to understand the pathophysiology of SARS-CoV-2, test novel therapeutic targets and develop new vaccine platforms and pharmacological interventions; (b) treatment protocols using convalescent plasma from patients that have recovered from COVID-19; (c) a comparative analysis of nasopharyngeal swabs with other noninvasive sampling methods for the detection of SARS-CoV-2; (d) epidemiological studies on risk factors, immune/inflammatory response and clinical course of COVID-19 patients; (e) strategies for early detection of asymptomatic COVID-19 patients; (f) quality improvement studies to assess the burden of the infection on adult day-care programs, primary care physicians and other practices, pediatric hospitals, and mental health.

7. How have state and federal COVID-related funds already impacted budgets?

Yes, but under the Provider Relief Fund provisions of the CARES ACT funds will be used to support costs of approximately \$5M in excess of regular operations as well as to minimally offset the near \$60M in lost revenues resulting from the COVID-19 pandemic. Under the education provisions of the CARES ACT, we requested \$16.4M, but only got \$4.9M for Provider Relief (from CMS/HHS) and \$1.5M for Education (from Department of Education (DoE)). UTHSA also received \$129,833 in CARES ACT funding from DoE for being a Hispanic Serving Institution. To date, there is a FCC COVID-19 Telehealth funds request of \$954,054 still pending. Expenditures from these new federal grants could then be captured in the mission specific formula for support of research operations. To avoid, potentially, employee furloughs or layoffs, we have implemented many cost cutting measures, including implementing a hiring freeze, deferring compensation increases, restricting travel, and delaying capital projects that are estimated to yield approximately \$30M in savings, leaving \$30M in unfunded operations for FY 2020.

- 8. How has the pandemic affected the overall financial status of small and rural community colleges? Not applicable
- 9. Does your institution have a public, online dashboard for the reporting of positive COVID-19 cases which is updated daily? If so, what is the link to the dashboard?

Yes, but, updated weekly, not daily. <a href="https://wp.uthscsa.edu/coronavirus/?utm\_source=d">https://wp.uthscsa.edu/coronavirus/?utm\_source=d</a> igital&utm\_medium=uthealthsahomepage-banner&utm\_campaign=covid19

Respectfully, Gilbert

Gilbert R. Loredo, J.D., M.P.A.
Associate Vice President for Government Relations
UT Health San Antonio
7703 Floyd Curl Drive
San Antonio, TX 78229-3900
Office 210.567.0372
Fax 210.567.0393
LoredoG@uthscsa.edu

